

**INVESTIGATION LOG**

**Name of Facility:**  
**Facility ID #:**  
**Administrator:**  
**Address:   City:   Zip:**  
**Phone Number:**

**Surveyor:**  
**Facility Type:**  
**Date/s of Survey:**  
**Task/Work Order #:**  
**Type of Survey:** *Complaint*

ITEM #	DATE	TIME	DESCRIPTION OF FACT	SOURCE

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